## REMARKS

Claims 1-28 were pending in this application prior to this Amendment and are still pending. Claims 29-104 were cancelled previously. Claims 1, 4, 6, 8, 10, 12, 13 and 20-25 are amended herein.

The examiner rejected claims 1, 2, and 13-18 under 35 U.S.C. § 103(a) as being unpatentable over U.S. Pat. No. 5,562,091 to Foster et al. (Foster) in view of U.S. Pat. No. 5,715,548 to Weismiller et al. (Weismiller) and U.S. Pat. No. 6,080,120 to Sandman et al (Sandman). As amended herein, claim 1 recites a combination of elements and limitations including, among other things, "a patient-support apparatus having a module-receiving cavity provided within a first portion of the patient support apparatus, a compression sleeve adapted to couple to the patient's limb, . . . a conduit through which the sleeve is inflated, a pneumatic coupler provided on a second portion of the patient support apparatus that is spaced from the first portion of the patient support apparatus and that is accessible to a caregiver for selective and releasable connection of the compression sleeve to the pneumatic coupler, the conduit being routed through an interior region of the patient support apparatus between the module-receiving cavity and the pneumatic coupler, and a compression module removably attachable to the patient-support apparatus and operable to inflate the compression sleeve through the conduit and the pneumatic coupler . . . ." Nowhere does Foster, Weismiller, or Sandman disclose or suggest that a conduit is routed through an interior region of a patient support between a module-receiving cavity and a pneumatic coupler that is accessible for selective and releasable attachment of a compression sleeve.

Foster's hoses 38, either of which would be the element in Foster that most naturally corresponds to the recited "conduit," extends from Foster's mobile ventilator assembly 12 to the patient (actually, to some sort of unnumbered mask or mouthpiece on the patient as illustrated in Foster's Figs. 1 and 2) without being routed through any interior region of Foster's critical care bed assembly 10. Instead, Foster's hoses 38 extend in free space from Foster's ventilator assembly 12 to the patient.

In connection with the examiner's reliance on Weismiller, the examiner first refers to Weismiller's power and control module 112, 186 that the examiner states fits into a module-receiving cavity within the base of Weismiller's patient-support apparatus. The examiner refers to Figs. 10 and 11 with regard to his discussion of the power and control module 112, 186 but these elements are actually shown in Figs. 12 and 12a. More importantly, these elements of Weismiller are components of Weismiller's hydraulic control system, not the pneumatic system. See, for example, col. 32 line 15 which refers to Weismiller's "[h]ydraulic power unit 112" and col. 32, lines 21-24 which state "[t]he pressurized hydraulic oil is supplied to control manifold 186 which in turn selectively supplies the pressurized hydraulic oil to actuators 132, 142, 150, 158, 168, 176." Accordingly, Weismiller's hydraulic control unit 112 and manifold 186 cannot be the "compression module" recited in claim 1 of the present application because claim 1 goes on to recite that "an outlet port of the compression module **pneumatically** communicates with the conduit." (Emphasis added)

The examiner also cites col. 6, lines 53-59; col. 14, lines 48-50; col. 66, lines 46-47; and col. 82, lines 12-13 for various propositions of Weismiller's teachings. However, none of these passages from Weismiller teach that a compression module has "at least a portion . . . received in the module-receiving cavity" as required in claim 1 of the present application. For example, the passage at col. 6, lines 53-59 of Weismiller only states that Weismiller's various care modules are "mountable on the bed" but makes no mention of any module-receiving cavity. The passage at col. 14, lines 48-50 states that "[a] sequential compression air device module is provided for coupling the sequential compression device to the air handling unit" but makes no mention of how the coupling occurs, let alone that a "compression module is received within the module receiving cavity of the patient-support apparatus" as required by claim 1 of the present application as amended herein. The passages at col. 66, lines 46-47 simply states "Sequential Compression Device (SCD) – [t]his module will control the optional compression boots" and "[i]t will use the GCI 1032 for interfacing to the caregiver." These passages are referring to use of the Graphical Caregiver Interface GCI 1032 as a user interface and are in a section of Weismiller having the heading "Controls on Side Rails." Accordingly, the passages at col. 66, lines 46-47 of Weismiller lack any teaching of a "compression module . . . received within the module receiving cavity of the patient-support apparatus" as required by claim 1 of the present

application as amended herein. The passage at col. 82, lines 12-13 simply states "[a] sequential compression device 1512 for venous compression therapy of a patient is also provide" but lacks any reference to a "compression module . . . received within the module receiving cavity of the patient-support apparatus" as required by claim 1 of the present application as amended herein. This passage is referring to Fig. 61 which is a block diagram having no structural details whatsoever regarding how SCD Air Module 1522 connects to anything.

The examiner relies on Sandman as teaching a conventional compression module 10 for a sequential compression sleeve adapted to couple to a patient's limb for venous compression therapy. With that, the undersigned does not disagree. However, there is no teaching of a patient support apparatus in Sandman at all, let alone one that has "a module-receiving cavity provided within a first portion of the patient support apparatus" in combination with "a compression sleeve . . . , a conduit through which the sleeve is inflated" and "a pneumatic coupler provided on a second portion of the patient-support apparatus that is spaced from the first portion of the patient support apparatus and that is accessible to a caregiver for selective and releasable connection of the compression sleeve to the pneumatic coupler, the conduit being routed through an interior region of the patient support apparatus between the module-receiving cavity and the pneumatic coupler," as recited in claim 1 as amended herein.

Even if one were to mount Sandman's compression controller 10 on Weismiller's patient-support apparatus, it is not seen why anyone skilled in the art would have any reason to route Sandman's conduits 100 through an interior region of any portion of Weismiller's patient support apparatus, especially given the fact that Foster's hoses 38 extend in free space from Foster's mobile ventilator assembly to the patient in much the same way that Sandman's conduits 100 extend in free space from Sandman's controller 10 to Sandman's compression sleeves 310. In fact, because Sandman's compression controller 10 already contains its own pneumatic compressor 20, it is not seen why one skilled in the hard would have any reason to interface Sandman's controller 10 with any portion of Weismiller's pneumatic system at all. Simply stated, there is no reason why anyone skilled in the art would combine Foster, Weismiller, and Sandman to arrive at the combination of elements set forth in claim 1 of the present application as amended herein. Accordingly, claim 1 along with claims 2-28, which

depend either directly or indirectly from claim 1, are in condition for allowance and such action is respectfully requested.

The examiner rejected dependent claims 3-12 and 19-28 under 35 U.S.C. § 103(a) as being unpatentable over Foster in view of Weismiller and Sandman and further in view of U.S. Pat. No. 5,611,096 to Bartlett et al. Because independent claim 1 is in condition for allowance as discussed above, this rejection of dependent claims 3-12 and 19-28 is rendered moot.

Based on the foregoing, all claims currently pending in the application are in condition for allowance and such action is respectfully requested. The amendments made herein to dependent claims 4, 6, 8, 10, 12, 13 and 20-25 were made only to either clarify these dependent claims, secure antecedent basis with the amendments made herein to claim 1, or to secure consistency with the amendments made herein to claim 1.

Submitted concurrently herewith is an Information Disclosure Statement that lists U.S. Pat. Nos. 6,047,424 and 6,119,291. The '424 patent is a CIP of Weismiller and the '291 patent is a CIP of the '424 patent. The examiner's attention is directed to Figs. 22 and 23 of these references. While both of these references discloses a manifold 200 into which control modules 203 are loaded and while it is at least implied in both of these references that the modules 203 may include a module relating to sequential compression therapy, there is no teaching or suggestion in either of these references that "a pneumatic coupler" should be "provided on a second portion of the patient-support apparatus that is spaced from the first portion of the patient support apparatus and that is accessible to a caregiver for selective and releasable connection of the compression sleeve to the pneumatic coupler" in combination with "a conduit" that is "routed through an interior region of the patient support apparatus between the module-receiving cavity and the pneumatic coupler" as recited in claim 1 of the present application as amended herein.

An earnest attempt has been made to place the application in condition for allowance. However, if there are any questions or comments that would speed prosecution of this patent application, the Examiner is invited to call the undersigned at (317) 231-7341.

It is respectfully requested that, if necessary to effect a timely response, this paper be considered as a Petition for an Extension of Time sufficient to effect a timely response and that shortages in fees, if any, be charged, or any overpayment in fees credited, to the Account of Barnes & Thornburg, Deposit Account No. 10-0435 with reference to file 7175-78572.

Respectfully submitted,

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INDS02 RSH 1024446v1